Fill in this information to	o identify your case:	
Debtor 1	David Adenaike	
Debtor 2 (Spouse, if filing)		
United States Bankrup	tcy Court for the: _EASTERN DISTRICT OF PENNSYLVANIA	
Case number [16-	13307-amc	Check if this is: An amended filing
Official Form		A supplement showing postpetition chapter 13 income as of the following date: 6/01/2020 MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job, attach a separate page with information about additional employers.	Employment status Occupation	■ Employed □ Not employed	☐ Employed ☐ Not employed
	Include part-time, seasonal, or self-employed work.	Employer's name		
	Occupation may include student or homemaker, if it applies.			
		How long employed the	ere?	
Par	Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

spouse unless you are separated.

4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 0.00 \$ N/A

3. +\$ 0.00 +\$ N/A

4. \$ 0.00 \$ N/A

Debtor 1 David Adenaike		_		Case r	number (<i>if ki</i>	nown)	_1	16-1330	07-an	nc			
					For	Debtor 1			For De				
	Cop	y line 4 here	4.		\$	(0.00		\$	ilig sp	N/A	_	
5.	List	all payroll deductions:											
٥.	5a.	Tax, Medicare, and Social Security deductions	5a		\$,	2 00		\$		NI/A		
	5a. 5b.	Mandatory contributions for retirement plans	5k		\$ 		0.00 0.00	_	φ		N/A N/A		
	5c.	Voluntary contributions for retirement plans	50		\$ 		0.00	_	Ψ		N/A	_	
	5d.	Required repayments of retirement fund loans	50		\$ —		0.00	_	Ψ		N/A		
	5e.	Insurance	56		\$—		0.00	_	\$		N/A	_	
	5f.	Domestic support obligations	5f		\$—		0.00	_	φ		N/A	_	
	5g.	Union dues	5 <u>0</u>		\$—		0.00	_	\$		N/A	_	
	5h.	Other deductions. Specify:		۶. ۱.+	\$		0.00	_	\$		N/A	_	
_		· · · · · · · · · · · · · · · · · · ·			Ψ			_				_	
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	-	\$		N/A	_	
7.	Cai	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	(0.00	-	\$		N/A	_	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total											
		monthly net income.	88	а.	\$	3,900	0.00		\$		N/A		
	8b.	Interest and dividends	8b	ο.	\$		0.00	_	\$		N/A	_	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	i t 80	2.	\$	(0.00	_	\$		N/A	_	
	8d.	Unemployment compensation	80		<u>\$</u> —		0.00	_	\$		N/A	_	
	8e.	Social Security	86		\$		0.00	_	\$		N/A		
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	(0.00	_	\$		N/A	_	
	8g.	Pension or retirement income	80		\$		0.00		\$		N/A		
	8h.	Other monthly income. Specify:	8h	Դ.+	\$	(0.00	_ +	\$		N/A	<u>.</u>	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	3,900	0.00] [\$		N/	A	
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$.3	3,900.00	+ 9	;		N/A	= \$	3.9	00.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		-		,					-	-,-	
11.	Inclu othe Do i	te all other regular contributions to the expenses that you list in Schedul adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ır dep							hedule 11.			0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certilies						,		12.	\$Combi		00.00
13.	Do	you expect an increase or decrease within the year after you file this form	n?							ı	month	ly inc	ome
		No.											
		Yes. Explain: Debtor will increase rental income by approximately	y 5%	up	on ea	ach annu	al le	ase	e renev	val.			

				<u> </u>						
Fill	in this informa	tion to identify yo	our case:							
Deb	otor 1	David Adenai	ike			Cł	neck if	this is:		
							•	amended filing		
1	otor 2 ouse, if filing)								wing postpetition chap the following date:	oter
(0)	ouco, ii iiiiig)							01/2020	the following date.	
Unit	ted States Bankri	uptcy Court for the:	EASTE	RN DISTRICT OF PENNS	YLVANIA		MN	I / DD / YYYY		
Cas	se number 16	6-13307-amc								
(If k	nown)									
0	fficial Fo	rm 106J								
		J: Your								12/15
info	ormation. If m		eded, atta	. If two married people and the control of the cont						
Par		ibe Your House	hold							
1.	Is this a join									
	■ No. Go to		in a separ	ate household?						
	□ No									
		-	st file Offic	ial Form 106J-2, <i>Expenses</i>	s for Separate House	hold of D	Debtor	2.		
2.	Do you have	e dependents?	■ No							
	Do not list Do and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor 2		_	Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents	names.							Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
									☐ Yes	
									☐ Yes	
3.	Do your exp	enses include		No					— 100	
		f people other t d your depende	han 🗖	Yes						
Par	rt 2: Estim	ate Your Ongoi	na Month	lv Expenses						
Est	timate your ex	penses as of ye	our bankrı	uptcy filing date unless y y is filed. If this is a supp						
Inc	lude expense	s paid for with	non-cash	government assistance i	f you know					
	value of such		d have inc	cluded it on Schedule I:	Your Income			Your expe	enses	
•		•								
4.		or home owners and any rent for th		ses for your residence. I or lot.	nclude first mortgage	4.	\$_		0.00	
	If not includ	led in line 4:								
	4a. Real e	state taxes				4a.	\$		295.17	
	4b. Proper	rty, homeowner's	s, or renter	's insurance		4b.	\$		100.00	
			•	upkeep expenses		4c.			125.00	
5		owner's associat		dominium dues	mo oquity loops	4d. 5			0.00	

Debtor 1	David Adenaike	Case num	ber (if known)	16-13307-amc
6. Utili t	ies.			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.		50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	25.00
6d.	Other. Specify:	6d.		0.00
	I and housekeeping supplies			150.00
	dcare and children's education costs	8.		0.00
. Clot	ning, laundry, and dry cleaning	9.	\$	50.00
	onal care products and services	10.		0.00
	cal and dental expenses	11.	· -	0.00
	sportation. Include gas, maintenance, bus or train fare.			
	ot include car payments.	12.	\$	150.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	itable contributions and religious donations	14.		0.00
5. Insu	——————————————————————————————————————		·	0.00
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	0.00
	Other insurance. Specify:	15d.	· -	0.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.		–	0.00
Spec		16.	\$	0.00
	Illment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
8. You i	payments of alimony, maintenance, and support that you did not report a			
	icted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	18.	\$	0.00
	r payments you make to support others who do not live with you.		\$	0.00
Spec		19.		
	r real property expenses not included in lines 4 or 5 of this form or on Sci			
	Mortgages on other property	20a.		1,094.89
	Real estate taxes	20b.		491.91
20c.	Property, homeowner's, or renter's insurance	20c.	\$	300.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	100.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. Oth e	r: Specify:	21.	+\$	0.00
0-1-				
	ulate your monthly expenses			0.004.07
	Add lines 4 through 21.		\$	2,931.97
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,931.97
3 Calc	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,900.00
	Copy your monthly expenses from line 22c above.	23b.	*	2,931.97
۷۵۵.	copy your monthly expenses from into 220 above.	۷۵۵.	Ψ	2,931.97
23c	Subtract your monthly expenses from your monthly income.			
_00.	The result is your <i>monthly net income</i> .	23c.	\$	968.03
For e	ou expect an increase or decrease in your expenses within the year after y cample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?			se or decrease because of a
■ Y				
- Y	es. Explain note.			

=					
FIII IN this int	ormation to identify your	case:			
Debtor 1	David Adenaike				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA		
Case number	16-13307-amc				
(if known)	10 10007 ame				☐ Check if this is an
					amended filing
Official Fo	<u>rm 106Dec</u>				
Declara	ation About a	n Individual	Debtor's Sch	edules	12/15
f two married	people are filing togethe	r, both are equally respo	nsible for supplying corre	ect information.	
					nt, concealing property, or imprisonment for up to 20
	. 18 U.S.C. §§ 152, 1341, 1		upicy case can result in	inies up to \$250,000, 0	imprisonment for up to 20
s	ign Below				
Did you	pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes	. Name of person		. Attac	ch Bankruptcy Petition P	Preparer's Notice, Declaration,
			and S	ignature (Official Form 1	19).
Under pe	nalty of periury. I declare	that I have read the sum	mary and schedules filed	with this declaration a	nd
	are true and correct.				
V /-/D	andal Aalamatta		V		
	avid Adenaike d Adenaike		XSignature of D	ehtor 2	
	a Adenaike ature of Debtor 1		Signature of Di	DUIUI Z	
Signo					
Date	June 8, 2020		Date		